

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>175277</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  <b>01/15/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>BRANDON WOODS AT ALVAMAR</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1501 INVERNESS DR LAWRENCE, KS 66047</b>		
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S 000	INITIAL COMMENTS  The following citations represent the findings of an Assisted Living/Residential Healthcare Licensure resurvey.	S 000			
S3220 SS=D	26-41-205 (k) Medication Clinical Record  (k) Clinical record. The administrator or operator, or the designee, shall ensure that the clinical record of each resident for whom the facility manages medication or prefills medication containers or syringes contains the following documentation: (1) A medical care provider ' s order for each medication; (2) the name of the pharmacy provider of the resident ' s choice; (3) any known medication allergies; and (4) the date and the 12-hour or 24-hour clock time any medication is administered to the resident.  This Requirement is not met as evidenced by: 3220 K.A.R. 26-41-205(d)3(D)  The facility identified a census of 44 residents. The sample included 3 residents. Based on observation, record review, and interview the facility failed to document medication administration times for 1 ( #103) of the sampled residents.  Findings included:  - The resident service plan signed 12/24/14 for resident # 103 revealed staff provided maximum assistance with all medications.	S3220			

If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S3220	Continued From Page 1  Review of the medication administration record (MAR) for December 2014 and January 2015 revealed staff failed to document times of administration of scheduled medications the resident received.  Observation on 1/12/15 at 4:16 P.M. revealed the resident ambulated with stand by assistance from 1 direct care staff through his/her apartment living room to a recliner and sat down.  Interview on 1/12/15 at 2:17 P.M. with administrative nursing staff A revealed staff did not document administration times for scheduled medications on the MAR.  The policy provided by the facility with a revision date of 11/14/05 regarding medication management revealed all medications were recorded at the time of supervision or administration. The policy also stated medication supervision/assistance and/or administration would be performed in accordance with state regulations and orientation, community and infection prevention practice guidelines.  The facility failed to document medication administration times staff provided for this resident.	S3220			
S3320 SS=D	28-39-254 CONSTRUCTION  (a) The assisted living facility or residential health care facility shall be designed, constructed, equipped and maintained to protect the health and safety of residents, personnel and the public.  (b) All new construction, renovation,	S3320			

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S3320	<p>Continued From Page 2</p> <p>remodeling and changes in building use in existing buildings shall comply with building and fire codes, ordinances and regulations enforced by city, county, and state jurisdictions, including the state fire marshal.</p> <p>(c) New construction, modifications and equipment shall conform to the following codes and standards:</p> <p>(1) Title III of the Americans with disabilities act, 42 U.S.C. 12181, effective as of January 26, 1992; and</p> <p>(2) "Food Service Sanitation Manual," health, education, and welfare (HEW) publication no. FDA 78-2081, as in effect on July 1, 1981.</p> <p>This Requirement is not met as evidenced by: K.A.R. 28-39-254(a) 3320</p> <p>The facility identified a census of 44 residents. The facility identified 12 residents as cognitively impaired and independently mobile on the second floor of assisted living. Based on observation and interview the facility failed to maintain a safe environment.</p> <p>Findings included:</p> <p>- Observation on 1/12/15 at 1:05 P.M. of the unlocked and open laundry room on the second level revealed the following chemicals with warning labels, kept in an unlocked cabinet: Eliminator Ant, Roach, and Spider killer, "keep out of reach of children"; Super Sani Cloth PDI, "keep out of reach of children."</p> <p>Interview on 1/12/15 at 1:07 P.M. with</p>	S3320			

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S3320	Continued From Page 3  administrative nursing staff A revealed he/she acknowledged chemicals should not be accessible to residents. He/she stated chemicals should be kept in a locked cabinet.  Interview on 1/12/15 at 4:45 P.M. with administrative staff B revealed the facility did not have a policy for assisted living regarding accessibility to chemicals.  The facility failed to maintain a safe environment for cognitively impaired and independently mobile residents.	S3320			
S3420 SS=D	28-39-256 MECHANICAL REQUIREMENTS  (c) Mechanical requirements.  (1) Heating, air conditioning, and ventilating systems.  (A) The system shall be designed to maintain a year-round indoor temperature range of 70oF or 21oC to 85oF or 26oC.  (B) Each apartment or individual living unit shall allow the resident to control the temperature.  (2) Plumbing and piping systems.  (A) Backflow prevention devices or vacuum breakers shall be installed on fixtures to which hoses or tubing can be attached.  (B) Water distribution systems shall be arranged to provide hot water at outlets at all times. The temperature of hot water shall range between 98oF and 120oF at bathing facilities, sinks, and lavatories in resident use areas.	S3420			

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S3420	<p>Continued From Page 4</p> <p>(3) Electrical requirements.</p> <p>(A) All spaces occupied by persons or machinery and equipment within the buildings, approaches to buildings, and parking lots shall have adequate lighting.</p> <p>(B) Minimum lighting intensity levels shall be as required in Table 1.</p> <p>(C) Each corridor and stairway shall remain lighted at all times.</p> <p>(D) Each light in resident use areas shall be equipped with shades, globes, grids, or glass panels.</p> <p>This Requirement is not met as evidenced by: K.A.R. 28-39-256(c)(2)(B)</p> <p>The facility identified a census of 44 residents. The facility identified 1 resident as cognitively impaired and independently mobile on the third floor of assisted living. The facility failed to maintain a water distribution system arranged to provide hot water ranging from 98 degrees Fahrenheit through 120 degrees Fahrenheit in resident areas.</p> <p>Findings included:</p> <ul style="list-style-type: none"> <li>- Review of the water temperature logs 7/2/14 through 1/9/15 provided by the facility revealed staff spot checked water temperatures throughout the facility, including assisted living, weekly. The third floor assisted living reading ranged from 106-120 degrees Fahrenheit during that timeframe.</li> </ul> <p>Observation on 1/12/15 at approximately 12:00</p>	S3420			

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S3420	<p>Continued From Page 5</p> <p>P.M. revealed the public restroom sink water on the third floor was 125.4 degrees Fahrenheit.</p> <p>Observation on 1/12/15 at 1:20 P.M. revealed the third floor kitchenette sink water was 124.1 degrees Fahrenheit.</p> <p>Observation on 1/12/15 at 4:27 P.M. with a second thermometer revealed the third floor kitchenette sink water was 130.1 degrees Fahrenheit.</p> <p>Observation on 1/12/15 at 4:32 P.M. with a second thermometer revealed the public restroom sink water on the third floor was 126.1 degrees Fahrenheit.</p> <p>Interview on 1/12/15 at 4:30 P.M. with maintenance staff C revealed he/she acknowledged the above mentioned areas had temperatures above 120 degrees Fahrenheit. He/she also acknowledged the water temperatures in residential areas should be below 120 degrees Fahrenheit.</p> <p>The undated policy provided by the facility regarding water temperatures was located on the bottom of the water monitoring logs and revealed the maintenance department was responsible for maintaining the proper temperatures of the domestic hot water supply.</p> <p>The facility failed to maintain appropriate water temperatures in residential areas.</p>	S3420			

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